



**AIKEN COUNTY TAX COLLECTOR
APPLICATION FOR BUSINESS REGISTRATION**

J. Martin Posey, Tax Collector
(803) 642-2081
(803)642-2086 fax

828 Richland Ave. W.
PO Box 873
Aiken, SC 29802-0873

New: _____

County Registration No. _____

Year: _____

Business Information

Name of Business: _____

Mailing Address: _____ City _____ State _____ Zip _____

Business Location: _____ City _____ State _____ Zip _____

Telephone No. () _____ E-Mail Address: _____

Federal EI/SS No. _____ Sales Tax ID No. _____

Property File No. _____ Type of Ownership: _____

Type of Business: Please describe in detail products or services provided.

Owner Information

Name: _____

Address: _____ City _____ State _____ Zip _____

Telephone Number: () _____

All Business Registrations expire December 31st of each year

I understand that issuance of a County Business Registration does not relieve me of the responsibility of meeting all county zoning and building code requirements, and that I am subject to all provisions of the Business Registration Ordinance No. 06-10-31 of Aiken County.

I certify that the information given in this application is true, that the Real Estate and Merchant taxes due and payable to the County have been paid.

Owner or Authorized Representative

Title

Failure to Comply is a misdemeanor and you may be fined up to \$500.00 and/or imprisonment for not more than thirty (30) days for each violation.